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TO: Group Art Unit 3743

FIRM: United States Patent and Trademark Office

FACSIMILE NO.: 703-872-9306

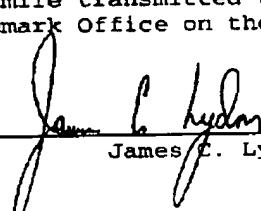
FROM: James C. Lydon

RE: Request for Corrected Filing Receipt  
U.S. Patent Appln. S.N. 10/506,971  
By: Alain DELACHE et al.  
Atty. Docket No.: BONN-121

TOTAL PAGES: 6 including cover sheet.

DATE: May 20, 2005

I hereby certify that this paper is being  
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\_\_\_\_\_  
James C. Lydon

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:

Alain DELACHE et al.

Serial Number: 10/506,971

Group Art Unit: 3743

Filed: September 8, 2004

Examiner: Unassigned

For: AIR ASSISTANCE APPARATUS PROVIDING FAST RISE  
AND FALL OF PRESSURE WITHIN ONE PATIENT'S BREATH

REQUEST FOR CORRECTED FILING RECEIPT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22314-1450

May 20, 2005

Sir:

Applicants request a Corrected Filing Receipt in view of an error in the original filing receipt. More particularly, the first inventor's residence should be Nice, FRANCE. A marked-up copy of the filing receipt showing the error is attached for the convenience of the Office.

Issuance of a corrected filing receipt showing the first inventor's correct residence is requested.

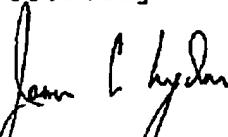
It is not believed any fee is payable for issuance of a corrected filing receipt because this error occurred due to Patent Office mistake, as demonstrated by the attached copy of the

U.S. Patent Appln. S.N. 10/506,971  
REQUEST FOR CORRECTED FILING RECEIPT

PATENT

inventors' declaration. Nevertheless, the Commissioner is authorized to charge our Deposit Account No. 50-1258 in the amount of any fee deemed necessary for entry and consideration of this Request.

Respectfully submitted,

  
James C. Lydon  
Reg. No. 30,082

Atty. Docket No.: BONN-121  
100 Daingerfield Road  
Suite 100  
Alexandria, Virginia 22314  
Telephone: (703) 838-0445  
Facsimile: (703) 838-0447

Enclosures:

Marked-Up Copy of Filing Receipt  
Inventors' Declaration

Page 1 of 2

UNITED STATES PATENT AND TRADEMARK OFFICE

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/506,971	09/08/2004	3743	523	BONN-121	13	27	1

**CONFIRMATION NO. 7675**

32954  
 JAMES C. LYDON  
 100 DAINGERFIELD ROAD  
 SUITE 100  
 ALEXANDRIA, VA 22314

**FILING RECEIPT**

'OC000000015985759'

Date Mailed: 05/12/2005

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please mail to the Commissioner for Patents P.O. Box 1450 Alexandria Va 22313-1450. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

**Applicant(s)**

FRANCE  
 Alain Delache, Nice, FRANCE;  
 Veronique Delache, Nice, FRANCE;

**Power of Attorney:** The patent practitioners associated with Customer Number 32954.

**Domestic Priority data as claimed by applicant**

This application is a 371 of PCT/IB03/01392 03/10/2003  
 which claims benefit of 60/382,441 03/08/2002

**Foreign Applications**

**Projected Publication Date:** 08/18/2005

**Non-Publication Request:** No

**Early Publication Request:** No

**\*\* SMALL ENTITY \*\***

**Title**

Air assistance apparatus providing fast rise and fall of pressure within one patient's breath

TO: N-104-103144 (MURRAY & KROHN, INC.)  
LX500Docket No. BONN-121**Declaration For U.S. Patent Application**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled  
**(INSERT TITLE) AN AIR ASSISTANCE APPARATUS PROVIDING FAST RISE AND FALL OF PRESSURE  
WITHIN ONE PATIENT'S BREATH**

the specification of which

(Check one of  
1, 2, or 3.)

1. \_\_\_\_\_ is attached hereto.
2. XX was filed on March 10, 2003 as  
International PCT Application Serial No. PCT/IB03/01392  
and was amended on \_\_\_\_\_  
(If applicable)
3. \_\_\_\_\_ was filed on \_\_\_\_\_  
U.S. Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_  
(If applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application for parent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application for which priority is claimed:

(List prior foreign applications.)	(Number)	(Country)	(Day/Month/Year Filed)	Priority Claimed
	(Number)	(Country)	(Day/Month/Year Filed)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	See attached list for additional prior foreign applications			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §120, of any United States application listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56, which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

<u>60/362,443</u> (Application Serial No.)	<u>March 8, 2002</u> (Filing Date)	<u>(Status)</u>
_____ (Application Serial No.)	_____ (Filing Date)	_____ (Status)

I hereby appoint as principal attorney James C. Lydon, Reg. No. 30,082.

Please direct all communications to the following address:

James C. Lydon  
100 Daingerfield Road  
Suite 100  
Alexandria, VA 22314  
Telephone: (703) 838-0445  
Facsimile: (703) 838-0447

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first or sole inventor: Alain DELACHEInventor's Signature: [Signature] Date: Sept 02 2004Residence: 15, avenue de la Roseraie, F-06300 Nice, FRANCECitizenship: FrenchPost Office Address: same as above

7-9-04-10040 -Mungitroyd, NICE

U.S.P.C.

1007-1872

Full name of second inventor: Véronique DELACHEInventor's Signature: Date: Sept 02, 2006Residence: 15, avenue de la Roseraie, F-06300 Nice, FRANCECitizenship: FrenchPost Office Address: same as above

Full name of third inventor:

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of fourth inventor:

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of fifth inventor:

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of sixth inventor:

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of seventh inventor:

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of eighth inventor:

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of ninth inventor:

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_